PTO/SB/06 (08-03)

Approved for use through 7/31/2006, OMB 0551-0032

U.S. Patient and Trademark Office; U.S. DEPARTMENT OF COMMERCE to a collection of information unless & displays a valid OMR control of the collection of information unless & displays a valid OMR control of the collection of information unless & displays a valid OMR control of the collection of information unless & displays a valid OMR control of the collection of information unless & displays a valid OMR control of the collection of the colle

Under the Peperwork Reduction Act of 1993, no persons are required to respond to a collection of Information unless it displays a vited OMS control number.  PATENT APPLICATION FEE DETERMINATION RECORD  Application of Octors Number										
Substitute for Form PTO-875								10/047,765		
CLAIMS AS FILED - PART! (Column 1) (Column 2) SMALL ENTITY								OR	OTHER THAN SMALL ENTITY	
	FOR	NUMBE	NUMBER FILED		NUMBER EXTRA		FEE		RATE	FEE
BASIC FEE D7 CFR 1.18(4))				j		. ــــا	OR		·	
	ALCLAMS FR 1.16(c))		minus 20	. [.	i	K 5		OR	X 1	
IND	PEIDENT CLAIR FR 1,16(b))	15	minus 3			x 8°		OR	x 3°	
MILITURE DEPENDENT CLAIM PRESENT (37 CFR 1.18(d))						+3=		OR	+5=	
٠,,,	re difference in o	otumo 1 is less the	un zero, ent	er 'O' in column 2	TOTAL		OR	TOTAL .		
To the difference in column 1 is less than zero, enter 't' in column 2										
9-22-84 (Column 1) (Column 2) (Column 3)					SMALL	ENTITY	OR		THAN ENTITY	
IT A	<i>V</i> 0 1	CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MENT	Total	AMENDMENT	Minus	" 26	2	1.9=	PEE	1	18.	PEC
END	(22 GFR 1,58(eg Independent	· //-	Minus	··· //	·2	x . 43 .		ÓR	. 86.	\$172
AME	(22 CFR 1,1303)	ιρ		7	211(0)	UK		OR	297)	77
FIRST PRESENTATION OF MARTIPLE DEPENDENT CLAIM (07 CFR 1.18(4))						TOTAL	<u> </u>	OR	TOTAL	
						ADD'L FEE	L	) OR	ADO'L FEE	H
		(Column 1)		(Column 2)	(Column 3)		<u> </u>	_		
8 5		CLAINS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY	PRESENT EXTRA	RATE	ADOH TIONAL FEE		RATE	ADOI- TIONAL FEE
Ÿ	Total	AMENDMENT	Minus	" A/-	-0		1 755	1	50.	100 10
Ş	(12 CFR 1.15(c)) Independent	. 72	Minus	<u> <del></del> </u>	.~	X s=	<del>                                     </del>	OR	1 = 200.	1601 11
AMENDMENT	(37 CEFR 1.LEGILD		السا	<u></u>	0	X 5	$\vdash$	OR		,0 20
FIRST PRESENTATION OF MILITIPLE DEPENDENT CLAIM (37 CFR 1.18(4))						TOTAL	<del> </del>	OR	TOTAL	101
						ADD'L FEE	L	J OR	ADDL FEE	pa.
(Column 1) (Column 2) (Column 3)										·
N C	Hoch	CLAIMS REMADIBING AFTER AMENDMENT	·	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADO/ TIO/AL		RATE	ADDI TIONAL SEE
Į Į	Total	28	Minus		•		7	T 🚕	K 5*	/
ENDMENT	Independent (37 CFR 1.16(b2)	14	Minus	14	•	x 5	1	OR	x 5=	X
Ž	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(4))					1.,		OR	+ 3	<u> </u>
						TOTAL ADOL FEE		OR	TOTAL ADDY FEE	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Proviously Paid For" IN THIS SPACE is less than 20, enter "20".										
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" (Total or Independent) is the highest number lound in the appropriate box in column 1.										

The "Highest Number Previously Pale For" (Total or Independent) is the highest number lound in the appropriate box in column 1.

This collection of Information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confiderability is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete including gathering, preparing, and submitting the complete application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time your require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.